POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	ę\$	1.6621	1/7
O.I.P.E. CLASSIFIER		۷.	1 1 1
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			
	619	6-4130	5.4

✓ Rejected	N Non-elected
= Allowed	1 Interference
_ (Through numeral) Canceled	A Appeal
÷ Restricted	O Objected

÷	110311	icteu o		
Claim, Date	Claim	Date		Claim Date
al :	Final Original		-	Original
	51	- - - - -		101
	52			102
3	53			103
	54			104
4	55		 	105
6	56	 	 	107
	57 58	- - - -	├─┤ ├	108
B	59	 	 	109
	60			110
1)	61			111
Ne	62			112
13	63			113
12	64		 	114
715	65	++++	 	115
16 (17)	66		╁╼┼╼┼╼┤╴┞	117
	67 68		┤╶┼╸╎┈┝╶ ┤ ┟	118
18	69		 - - - - -	119
19	70		 	120
	71			121
	72			122
	73			123
41	74			124
25	75			125
25	76			126
27	77		 	127
28	78			128 7
	79		 - - - - -	130
30	81		 	131
31	82			132
32 33	83	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 		133
34	84			134
35 1	85			135
CE N N	86			136
27/1///	87		1-1-1-1	137
	88		++++	139
GD NN	89		+	140
OV NY	90			141
W	9:		++++	142
	9:			143
44	9		+ + + + + + + + + + + + + + + + + + + +	144
	9			145
46 /	9			146
47 / / /	9			147
48	9			148
49	9			149
50	10	0		150

If more than 150 claims or 10 actions staple additional sheet here

(LEFT INSIDE)

BEST AVAILABLE COPY